STATE OF NEBRASKA

ROSTER

HOME HEALTH AGENCIES

Nebraska Health and Human Services System



Department of Health and Human Services Regulation and Licensure
Credentialing Division
Nebraska State Office Building
301 Centennial Mall South-Third Floor
P.O. Box 94986
Lincoln, NE 68509-4986

Home Health Agency Licenses Expire January 31, 2007 Roster last updated September 11, 2007

NEBRASKA HOME HEALTH AGENCIES

FACILITY TYPE

HHA 8/9	Home Health Agency –	Medicare	/Medicaid	Certified

HHA LIC Home Health Agency – Licensed Only
HHA 19 Home Health Agency – Medicaid Certified

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Accreditation Administration **Services** HOME HEALTH AIDE AINSWORTH (BROWN) - 69210 HHA8/9 **GOVERNMENT-COU** NURSING SERVICES Brown County Hospital Home Health 061001 OCCUPATIONAL THERAPY PHYSICAL THERAPY 945 EAST ZERO STREET SPEECH THERAPY (402) 387-2016 FAX: (402) 387-2804 **BROWN COUNTY HOSPITAL NEIL HILTON** c/o: BROWN COUNTY HOSPITAL HOME HEALTH ATT: ADMINISTRATOR, 945 EAST ZERO STREET, AINSWORTH NE 69210 HOME HEALTH AIDE ALBION (BOONE) - 68620 **HHA8/9 GOVERNMENT-COU** INTRAVENOUS THERAPY Boone County Health Center 031001 NURSING SERVICES OCCUPATIONAL THERAPY 632 WEST FAIRVIEW, PO BOX 151 PHYSICAL THERAPY (402) 395-2191 FAX: (402) 395-5165 SPEECH THERAPY **BOONE COUNTY** VICTOR LEE c/o: BOONE COUNTY HEALTH CENTER 632 WEST FAIRVIEW, PO BOX 151, ALBION NF 68620 HOME HEALTH AIDE ALBION (BOONE) - 68620 HHA LIC **GOVERNMENT-COU** NURSING SERVICES 031003 Boone County Health Center Preference Care 723 WEST FAIRVIEW ST., P.O. BOX 151 (402) 395-3147 FAX: (402) 395-2295 **BOONE COUNTY** VICTOR LEE c/o: BOONE COUNTY HEALTH CENTER 723 WEST FAIRVIEW ST., P.O. BOX 151, ALBION NF 68620 HOME HEALTH AIDE ALMA (HARLAN) - 68920 HHA LIC INTRAVENOUS THERAPY GOOD SAMARITAN SOCIETY HOME CARE OF SOUTH WEST N HHA200610 NURSING SERVICES OCCUPATIONAL THERAPY 719 N BROWN STREET PHYSICAL THERAPY (308) 928-2104 FAX: SPEECH THERAPY EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY MARKUS MEYER NE 68920 c/o: HELPING HANDS HOME HEALTH AGENCY 719 N BROWN STREET, ALMA HOME HEALTH AIDE AUBURN (NEMAHA) - 68305 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY 561002

Good Samaritan Home Care of Southeast Nebraska

(402) 274-5541 FAX: (402) 274-5174

JEFFREY HARVEY

418 Q STREET

THE EV. LUTHERAN GOOD SAMARITAN SOCIETY

c/o: GOOD SAMARITAN CENTER HOME HEALTH ATT: CARLA TROUT, DIRECTOR, 418 Q STREET, AUBURN NE 68305

NURSING SERVICES OCCUPATIONAL THERAPY PHYSICAL THERAPY SPEECH THERAPY

NE 68008

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE AUBURN (NEMAHA) - 68305 HHA8/9 **GOVERNMENT-COU** INTRAVENOUS THERAPY Nemaha County Home Care 561001 NURSING SERVICES OCCUPATIONAL THERAPY **2022 13TH STREET** PHYSICAL THERAPY (402) 274-6115 FAX: (402) 274-4399 SPEECH THERAPY NEMAHA COUNTY HOSPITAL JERE GRAVATT c/o: NEMAHA COUNTY HOME CARE 2022 13TH STREET, AUBURN NE 68305 DIALYSIS BEATRICE (GAGE) - 68310 **HHA8/9** NON PROFIT - C HOME HEALTH AIDE Beatrice Community Hospital Home Care 321004 INTRAVENOUS THERAPY NURSING SERVICES 1201 SOUTH 9TH STREET **JCAHO** OCCUPATIONAL THERAPY (402) 223-2366 FAX: (402) 228-8500 PHYSICAL THERAPY RESPIRATORY THERAPY BEATRICE COMMUNITY HOSPITAL & HEALTH CENTER, INC. SOCIAL WORK PRACTICE THOMAS SOMMERS SPEECH THERAPY c/o: BEATRICE COMMUNITY HOSPITAL HOME HEALTH ATT: THOMAS SOMMERS, ADMINISTRATOR, P.O. BOX 278, BEATRICE NE 68310 BRANCH/SATELLITE: Pawnee County Home Health - 600 I STREET, PAWNEE CITY HOME HEALTH AIDE BEATRICE (GAGE) - 68310 HHA LIC NON PROFIT - C NURSING SERVICES Personal Nursing Care 321005 1201 SOUTH 9TH STREET **JCAHO** (402) 223-2366 FAX: (402) 228-8500 BEATRICE COMMUNITY HOSPITAL & HEALTH CENTER, INC. THOMAS SOMMERS c/o: PERSONAL CARE NURSING HOME HEALTH AGENCY ATT: LARRY EMERSON, ADMINISTRATOR, P.O. BOX 278, BEATRICE NE 68310 HOME HEALTH AIDE BELLEVUE (SARPY) - 68005 HHA LIC LIMITED LIABIL NURSING SERVICES Right At Home - Omaha SE HHA200601 1718 HILLCREST DRIVE, SUITE C (402) 292-2212 FAX: **DEBRA YOST** c/o: RIGHT AT HOME - OMAHA SE 1718 HILLCREST DRIVE, SUITE C, BELLEVUE NE 68005 HOME HEALTH AIDE BLAIR (WASHINGTON) - 68008 **CORPORATION** HHA8/9 NURSING SERVICES Burt-Washington Home Health Care and Hospice 791001 OCCUPATIONAL THERAPY PHYSICAL THERAPY P O BOX 250, 810 NORTH 22ND STREET SOCIAL WORK PRACTICE (402) 426-2182 FAX: (402) 426-1260 SPEECH THERAPY MEMORIAL COMMUNITY HOSPITAL SALLY OLSON

c/o: BURT-WASHINGTON HOME HEALTH CA P O BOX 250, 810 NORTH 22ND STREET, BLAIR

BRANCH/SATELLITE: Burt-Washington Home Health Care and Hospice - 120 SOUTH 9TH ST., TEKAMAH

BRANCH/SATELLITE: Burt-Washington Home Health Care & Hospice - 322 NORTH OAKLAND AVENUE, OAKLAND

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE BLAIR (WASHINGTON) - 68008 HHA LIC **CORPORATION** NURSING SERVICES Community Home Health Care, Inc. 791002 OCCUPATIONAL THERAPY PHYSICAL THERAPY P O BOX 250, 810 NORTH 22ND STREET SOCIAL WORK PRACTICE (402) 426-2182 FAX: (402) 426-1260 SPEECH THERAPY COMMUNITY HOME HEALTH CARE, INC. SALLY OLSON c/o: COMMUNITY HOME HEALTH CARE, IN P O BOX 250, 810 NORTH 22ND STREET, BLAIR NE 68008 BRANCH/SATELLITE: Community Home Health Care - 322 N. Oakland Ave., OAKLAND BRANCH/SATELLITE: Community Home Health Care - 120 South 9th St., TEKAMAH HOME HEALTH AIDE BRIDGEPORT (MORRILL) - 69336 HHA8/9 **GOVERNMENT-COU** INTRAVENOUS THERAPY Morrill County Comm. Hosp. Home Health Agency 541001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 579, 1309 R STREET PHYSICAL THERAPY (308) 262-1600 FAX: (308) 262-1581 SPEECH THERAPY MORRILL COUNTY COMMUNITY HOSPITAL JULIA MORROW c/o: MORRILL COUNTY COMM. HOSP. HOM P O BOX 579, 1309 R STREET, BRIDGEPORT NE 69336 HOME HEALTH AIDE BROKEN BOW (CUSTER) - 68822 **HHA8/9 CORPORATION** INTRAVENOUS THERAPY Jennie M. Melham Memorial Med. Ctr. Home Health Care 101001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 250, 145 MEMORIAL DRIVE PHYSICAL THERAPY (308) 872-6891 FAX: (308) 872-6116 JENNIE M MELHAM MEMORIAL MEDICAL CENTER, INC. MICHAEL STECKLER c/o: JENNIE M. MELHAM MEM MED CTR H P O BOX 250, 145 MEMORIAL DRIVE, BROKEN BOW NE 68822 HOME HEALTH AIDE BUTTE (BOYD) - 68722 HHA LIC NON PROFIT - C INTRAVENOUS THERAPY Avera Gregory Healthcare Center Home Health 051001 NURSING SERVICES OCCUPATIONAL THERAPY 730 WILSON, P O BOX 319 PHYSICAL THERAPY (402) 775-2508 FAX: (605) 835-9422 AVERA MCKENNAN HOSPITAL MARK KLOSTERMAN c/o: GREGORY HOSPITAL HHA ADMINISTRATOR, PO BOX 408, GREGORY SD 57533 HOME HEALTH AIDE CHADRON (DAWES) - 69337 **HHA8/9** CORPORATION INTRAVENOUS THERAPY Chadron Comm. Hosp. & Health Services-HHA 211001 NURSING SERVICES OCCUPATIONAL THERAPY 821 MOREHEAD STREET PHYSICAL THERAPY RESPIRATORY THERAPY (308) 432-5521 FAX: (308) 432-2737 SOCIAL WORK PRACTICE CHADRON COMMUNITY HOSPITAL CORP. SPEECH THERAPY HAROLD KRUEGER JR

c/o: CHADRON COMMUNITY HOME HEALTH 821 MOREHEAD STREET, CHADRON

NE 68729

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE CLAY CENTER (CLAY) - 68933 HHA LIC **GOVERNMENT-COU** INTRAVENOUS THERAPY Clay County Health Department 161001 NURSING SERVICES 209 WEST FAIRFIELD (402) 762-3571 FAX: (402) 762-3573 CLAY COUNTY HEALTH DEPARTMENT JANICE BAIRD c/o: CLAY COUNTY HEALTH DEPARTMENT 209 WEST FAIRFIELD, CLAY CENTER NE 68933 HOME HEALTH AIDE COLUMBUS (PLATTE) - 68602 **HHA8/9 CORPORATION** INTRAVENOUS THERAPY Home Health and Hospice of Columbus Community Hospital, Inc. 631001 NURSING SERVICES OCCUPATIONAL THERAPY **3005 19TH STREET JCAHO** PHYSICAL THERAPY SOCIAL WORK PRACTICE (402) 562-3300 FAX: (402) 563-9622 SPEECH THERAPY COLUMBUS COMMUNITY HOSPITAL, INC. **GARY PULSIPHER** c/o: HOME HEALTH AND HOSPICE OF COLUMBUS COM. HOSP. INC PO BOX 1800, COLUMBUS NE 68602 HOME HEALTH AIDE COZAD (DAWSON) - 69130 HHA LIC **GOVERNMENT-DIS** NURSING SERVICES HHA1001 Caremates 300 EAST 12TH, BOX 108 (308) 784-4630 FAX: (308) 784-4691 COZAD HOSPITAL DISTRICT #2 LYLE DAVIS c/o: CAREMATES 300 EAST 12TH, BOX 108, COZAD NF 69130 HOME HEALTH AIDE COZAD (DAWSON) - 69130 HHA8/9 **GOVERNMENT-DIS** INTRAVENOUS THERAPY Central Plains Home Health Agency 221001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 108, 300 EAST 12TH STREET PHYSICAL THERAPY (308) 784-4630 FAX: (308) 784-4691 SOCIAL WORK PRACTICE SPEECH THERAPY COZAD HOSPITAL DISTRICT #2 SUSAN DEAVER, RN/LPN c/o: CENTRAL PLAINS HOME HEALTH AGE P O BOX 108, 300 EAST 12TH STREET, COZAD NE 69130 HOME HEALTH AIDE CREIGHTON (KNOX) - 68729 **HHA8/9 GOVERNMENT-CIT** INTRAVENOUS THERAPY Creighton Area Health Services Home Health 491001 NURSING SERVICES P O BOX 186, 1503 MAIN STREET OCCUPATIONAL THERAPY PHYSICAL THERAPY (402) 358-5700 FAX: (402) 358-5769 SPEECH THERAPY CITY OF CREIGHTON

c/o: CREIGHTON AREA HEALTH SERVICES P O BOX 186, 1503 MAIN STREET, CREIGHTON

PAUL HURD

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Accreditation Administration **Services** INTRAVENOUS THERAPY DAKOTA CITY (DAKOTA) - 68731 HHA LIC **GOVERNMENT-COU** NURSING SERVICES Dakota County Health Department 201001 P O BOX 155 (402) 987-2164 FAX: (402) 987-2163 DAKOTA COUNTY HEALTH DEPARTMENT PAM DEVRIES c/o: DAKOTA COUNTY HEALTH DEPARTMEN P O BOX 155, DAKOTA CITY NE 68731 HOME HEALTH AIDE DECATUR (BURT) - 68020 **HHA LIC CORPORATION** INTRAVENOUS THERAPY Burgess Home Health/Hospice 081001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 188, 12TH & BROADWAY PHYSICAL THERAPY SOCIAL WORK PRACTICE (402) 349-5613 FAX: (712) 423-9188 SPEECH THERAPY **BURGESS HEALTH CENTER** FRANCIS TRAMP c/o: BURGESS HEALTH CENTER ATT: SHERRI JOHNSTON, PO BOX 119, 1600 DIAMOND ST., ONAWA IA 51040 HOME HEALTH AIDE FAIRBURY (JEFFERSON) - 68352 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Jefferson Community Health Center, Inc 441001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 277, 2200 NORTH H STREET PHYSICAL THERAPY (402) 729-3351 FAX: (402) 729-2102 SPEECH THERAPY JEFFERSON COMMUNITY HEALTH CENTER, INC. WILLIAM WELCH c/o: JEFFERSON COMMUNITY HEALTH CEN P O BOX 277, 2200 NORTH H STREET, FAIRBURY NE 68352 HOME HEALTH AIDE FALLS CITY (RICHARDSON) - 68355 HHA8/9 CORPORATION INTRAVENOUS THERAPY In Home Health Care, Inc. 661001 NURSING SERVICES OCCUPATIONAL THERAPY 116 WEST 19TH STREET PHYSICAL THERAPY (402) 245-5968 FAX: (402) 245-5907 SPEECH THERAPY IN HOME HEALTH CARE, INC. CAROL HAMILTON c/o: IN HOME HEALTH CARE, INC. 116 WEST 19TH STREET, FALLS CITY NE 68355 HOME HEALTH AIDE FALLS CITY (RICHARDSON) - 68355 HHA LIC **SOLE PROPRIETO** INTRAVENOUS THERAPY Lyons Quality Home Services 661004 NURSING SERVICES 800 EAST 21ST STREET

JOYCE A. LYONS JOYCE LYONS

(402) 245-6144 FAX: (402) 245-6126

c/o: LYONS QUALITY HOME SERVICES 800 EAST 21ST STREET, FALLS CITY

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE FALLS CITY (RICHARDSON) - 68355 HHA LIC **CORPORATION** NURSING SERVICES Special Services, Inc. 661002 116 WEST 19TH STREET (402) 245-5968 FAX: (402) 245-5907 SPECIAL SERVICES, INC. CAROL HAMILTON c/o: SPECIAL SERVICES, INC. 116 WEST 19TH STREET, FALLS CITY NE 68355 HOME HEALTH AIDE FREMONT (DODGE) - 68025 **HHA8/9 GOVERNMENT-COU** INTRAVENOUS THERAPY Fremont Area Medical Center Home Health Care 251001 NURSING SERVICES OCCUPATIONAL THERAPY 2350 NORTH CLARKSON **JCAHO** PHYSICAL THERAPY SOCIAL WORK PRACTICE (402) 941-7200 FAX: (402) 941-7208 SPEECH THERAPY FREMONT AREA MEDICAL CENTER MICHAEL LEIBERT c/o: FREMONT AREA MEDICAL CENTER HOME HEALTH CARE 450 EAST 23RD STREET, FREMONT NE 68025 NURSING SERVICES GERING (SCOTTS BLUFF) - 69341 HHA LIC **CORPORATION** Nrc Home Health Services HHA1045 2550 21ST (308) 632-4342 FAX: (308) 630-8190 NORTHFIELD RETIREMENT COMMUNITIES, INC. MARILYN REINMUTH c/o: NRC HOME HEALTH SERVICES 2100 CIRCLE DRIVE, SCOTTSBLUFF NE 69361 HOME HEALTH AIDE GORDON (SHERIDAN) - 69343 HHA8/9 **GOVERNMENT-DIS** INTRAVENOUS THERAPY Gordon Memorial Hospital Home Health 731001 NURSING SERVICES PHYSICAL THERAPY 300 EAST 8TH STREET (308) 282-0401 FAX: (308) 282-0431 GORDON MEMORIAL HOSPITAL DISTRICT DON NELSON c/o: GORDON MEM. HOSPITAL HOME HEAL 300 EAST 8TH STREET, GORDON NE 69343 HOME HEALTH AIDE GOTHENBURG (DAWSON) - 69138 HHA LIC **CORPORATION** NURSING SERVICES Caring Hands At Home HHA200607 2520 AVE M PO BOX 429

(308) 537-7138 FAX: (308) 537-7130 KC HEALTH CARE ENTERPRISE INC SCOTT BAHE

c/o: CARING HANDS AT HOME 2520 AVE M, PO BOX 429, GOTHENBURG NE 69138

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Licensee License # Ownership/ Type Administration Accreditation **Services** INTRAVENOUS THERAPY GRAND ISLAND (HALL) - 68803 HHA LIC CORPORATION NURSING SERVICES Option Care Enterprises, Inc. 371001 2604 ST PATRICK AVE (308) 384-9191 FAX: (308) 384-7049 OPTION CARE ENTERPRISES, INC. PAULA HANSEN c/o: OPTION CARE ENTERPRISES, INC. 2604 ST PATRICK AVE, GRAND ISLAND NE 68803 HOME HEALTH AIDE GRAND ISLAND (HALL) - 68801 HHA LIC **CORPORATION** NURSING SERVICES Riverside Lodge HHA200602 404 WOODLAND DRIVE (308) 382-1657 FAX: RIVERSIDE LODGE, INC JODIE REEH HOME HEALTH AIDE GRAND ISLAND (HALL) - 68803 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY 371002 Saint Francis Medical Center Home Health Care Agency NURSING SERVICES OCCUPATIONAL THERAPY 2121 NORTH WEBB ROAD SUITE 304 **JCAHO** PHYSICAL THERAPY (308) 398-2600 FAX: (308) 398-2633 SOCIAL WORK PRACTICE SPEECH THERAPY CATHOLIC HEALTH INITIATIVES MICHAEL GLOOR c/o: SAINT FRANCIS MEDICAL CENTER HOME HEALTH ATT: MICHAEL GLOOR, ADMINISTRATOR, PO BOX 9804, GRAND ISLAND NE 68802 HOME HEALTH AIDE GRANT (PERKINS) - 69140 HHA LIC **GOVERNMENT-DIS** INTRAVENOUS THERAPY Hi Line Private Health Care HHA1011 NURSING SERVICES OCCUPATIONAL THERAPY RR 1, BOX 26 111 WEST 10TH PHYSICAL THERAPY (308) 352-7260 FAX: (308) 352-7213 SPEECH THERAPY PERKINS COUNTY HOSPITAL DISTRICT CAROL KRAUS c/o: HI LINE PRIVATE HEALTH CARE ATTN: SHAUN MEYER, 900 LINCOLN AVE, GRANT NE 69140 HOME HEALTH AIDE GRANT (PERKINS) - 69140 HHA8/9 **GOVERNMENT-DIS** INTRAVENOUS THERAPY Hi-Line Home Health 601001 NURSING SERVICES OCCUPATIONAL THERAPY RR 1, BOX 26, 111 WEST 10TH STREET PHYSICAL THERAPY (308) 352-7260 FAX: (308) 352-7213 SPEECH THERAPY

c/o: HI-LINE HOME HEALTH ATTN: SHAUN MEYER, 900 LINCOLN AVENUE, GRANT NE 69140

PERKINS COUNTY HOSPITAL DISTRICT

CAROL KRAUS

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Licensee License # Ownership/ Type Administration Accreditation **Services** HOME HEALTH AIDE HARTINGTON (CEDAR) - 68739 **HHA LIC** NON PROFIT - C INTRAVENOUS THERAPY AVERA SACRED HEART HOME CARE SERVICES 121001 NURSING SERVICES OCCUPATIONAL THERAPY 405 WEST DARLENE **JCAHO** PHYSICAL THERAPY (402) 254-3935 FAX: (402) 254-2393 SOCIAL WORK PRACTICE SPEECH THERAPY SACRED HEART HEALTH SERVICES JEAN HUNHOFF c/o: AVERA SACRED HEART HOME CARE SERVICES ATT: JEAN HUNHOFF, ADMINISTRATOR, 501 SUMMIT, YANKTON SD 57078 HASTINGS (ADAMS) - 68901 HOME HEALTH AIDE HHA LIC **CORPORATION** INTRAVENOUS THERAPY Caring Hands Services of Mary Lanning Hospital 011501 NURSING SERVICES 715 NORTH ST. JOSEPH **JCAHO** (402) 461-5092 FAX: (402) 461-5091 MARY LANNING MEMORIAL HOSPITAL ASSOCIATION MICHAEL KEARNEY c/o: CARING HANDS SERVICES OF MARY LANNING HOSP. ATT: CAROL ERICKSON, DIRECTOR, 715 NORTH ST. JOSEPH, HASTINGS NE 68901 HOME HEALTH AIDE HASTINGS (ADAMS) - 68902 NON PROFIT - C **HHA8/9** INTRAVENOUS THERAPY GOOD SAMARITAN VILLAGE HOME HEALTH CARE 011002 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 2149, 926 EAST E STREET PHYSICAL THERAPY (402) 463-3181 FAX: (402) 460-3206 SPEECH THERAPY THE EV. LUTHERAN GOOD SAMARITAN SOCIETY JUDY RAINFORTH c/o: GOOD SAMARITAN VILLAGE HOME HE P O BOX 2149, 926 EAST E STREET, HASTINGS NE 68902 HOME HEALTH AIDE HASTINGS (ADAMS) - 68901 **HHA8/9 CORPORATION** INTRAVENOUS THERAPY Home Health Services of Mary Lanning Memorial Hospital 011004 NURSING SERVICES OCCUPATIONAL THERAPY 715 NORTH ST JOSEPH AVENUE **JCAHO** PHYSICAL THERAPY (402) 461-5161 FAX: (402) 461-5091 SOCIAL WORK PRACTICE SPEECH THERAPY MARY LANNING MEMORIAL HOSPITAL ASSOCIATION W. MICHAEL KEARNEY c/o: HOME HEALTH SERVICES OF MARY LANNING ATT: CAROL ERICKSON, DIRECTOR, 715 NORTH ST. JOSEPH AVENUE, HASTINGS NE 68901 BRANCH/SATELLITE: HH Svcs of Mary Lanning Mem Hosp / Webster Co Br - 102 NORTH PINE, PO BOX 547, BLUE HILL BRANCH/SATELLITE: HH Svs of Mary Lanning Mem. Hosp / Clay Co Branch - 209 WEST FAIRFIELD STREET, CLAY CEN HOME HEALTH AIDE HASTINGS (ADAMS) - 68902 **HHA LIC** NON PROFIT - C NURSING SERVICES The Village Home Care Connection 011502 926 EAST E STREET, P.O. BOX 2149 (402) 463-3181 FAX: (402) 460-3206 THE EV. LUTHERAN GOOD SAMARITAN SOCIETY

c/o: THE VILLAGE HOME CARE CONNECTI 926 EAST E STREET, P.O. BOX 2149, HASTINGS

JUDY RAINFORTH

HEARTLAND HOME CARE INC

c/o: HEARTLAND HOMES CARE INC PO BOX 368, KEARNEY NE 68848

KATHY ULRICH

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE HEBRON (THAYER) - 68370 HHA8/9 **GOVERNMENT-COU** INTRAVENOUS THERAPY Heartland Home Health 761002 NURSING SERVICES OCCUPATIONAL THERAPY 120 PARK AVENUE PHYSICAL THERAPY (402) 768-4625 FAX: (402) 768-2630 SOCIAL WORK PRACTICE SPEECH THERAPY THAYER COUNTY HEALTH SERVICES JOYCE BECK c/o: HEARTLAND HOME HEALTH AGENY ATT: JULIE EASTON, DIRECTOR, 120 PARK AVENUE, HEBRON NE 68370 HOME HEALTH AIDE HEBRON (THAYER) - 68370 **HHA LIC GOVERNMENT-COU** INTRAVENOUS THERAPY Heartland Home Health Elder Care 761001 NURSING SERVICES OCCUPATIONAL THERAPY 120 PARK AVENUE PHYSICAL THERAPY SOCIAL WORK PRACTICE (402) 768-4625 FAX: (402) 768-2630 SPEECH THERAPY THAYER COUNTY HEALTH SERVICES JOYCE BECK c/o: HEARTLAND HOME HEALTH ELDE ATT: JULIE EASTON, DIRECTOR, 120 PARK AVENUE, HEBRON NE 68370 HOME HEALTH AIDE HOLDREGE (PHELPS) - 68949 HHA8/9 NON PROFIT - C INTRAVENOUS THERAPY Phelps Memorial Home Health Care 611001 NURSING SERVICES OCCUPATIONAL THERAPY 1215 TIBBALS STREET **JCAHO** PHYSICAL THERAPY (308) 995-4375 FAX: (308) 995-4548 SPEECH THERAPY PHELPS MEMORIAL HEALTH CENTER JOYCE HEIN c/o: PHELPS MEMORIAL HOME HEALTH CARE JOYCE G. HEIN, CEO, 1215 TIBBALS, HOLDREGE NE 68949 HOME HEALTH AIDE KEARNEY (BUFFALO) - 68847 HHA8/9 CORPORATION INTRAVENOUS THERAPY Good Samaritan Hospital Home Health 071002 NURSING SERVICES OCCUPATIONAL THERAPY 2501 30TH **JCAHO** PHYSICAL THERAPY (308) 865-7090 FAX: (308) 865-2923 SOCIAL WORK PRACTICE SPEECH PATHOLOGY GOOD SAMARITAN HEALTH SYSTEMS JOHN ALLEN c/o: GOOD SAMARITAN HOSPITAL HOME HEALTH JOHN ALLEN, 10 EAST 31ST STREET, KEARNEY NE 68848 HOME HEALTH AIDE KEARNEY (BUFFALO) - 68847 HHA LIC NURSING SERVICES Heartland Home Care Inc HHA1041 124 W 46TH, STE 203 (308) 234-4663 FAX: (308) 234-4668

SOCIAL WORK PRACTICE

SPEECH THERAPY

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE KEARNEY (BUFFALO) - 68845 HHA LIC LIMITED PARTNE NURSING SERVICES Northridge Home Health HHA1049 5410 17TH AVENUE (308) 698-5410 FAX: NORTHRIDGE RETIREMENT COMMUNITY **DEBRA PRANGE** c/o: NORTHRIDGE RETIREMENT COMMUNITY, LLP 5410 17TH AVENUE, KEARNEY NE 68845 HOME HEALTH AIDE LEXINGTON (DAWSON) - 68850 **HHA LIC GOVERNMENT-DIS** NURSING SERVICES **Tender Home Care** 221003 P O BOX 980, 1600 WEST 13TH (308) 324-8300 FAX: (308) 324-8348 TRI-COUNTY AREA HOSPITAL DISTRICT **CALVIN HINER** c/o: CALVIN HINER, ADMINISTRATOR TRI-COUNTY HOSPITAL, PO BOX 980, LEXINGTON NE 68850 HOME HEALTH AIDE LEXINGTON (DAWSON) - 68850 HHA8/9 **GOVERNMENT-DIS** INTRAVENOUS THERAPY 221004 Tri County Hospital Home Health Care NURSING SERVICES PHYSICAL THERAPY P O BOX 980, 1600 WEST 13TH RESPIRATORY THERAPY (308) 324-8300 FAX: (308) 324-8613 SPEECH THERAPY TRI-COUNTY AREA HOSPITAL DISTRICT **CALVIN HINER** c/o: CALVIN HINER, ADMINISTRATOR TRI-COUNTY HOSPITAL, PO BOX 980, LEXINGTON NE 68850 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 HHA LIC CORPORATION INTRAVENOUS THERAPY Arcadia Health Care 501001 NURSING SERVICES OCCUPATIONAL THERAPY 3130 O STREET, SUITE D PHYSICAL THERAPY (402) 435-5533 FAX: (402) 435-5670 SOCIAL WORK PRACTICE SPEECH THERAPY ARCADIA HEALTH SERVICES, INC. JANICE CEPURE c/o: ARCADIA HEALTH CARE HOME HEALTH AGENCY ATT: ADMINISTRATOR, 26777 CENTRAL PARK BLVD., SUITE 200, SOUTHFIELD MI 48076 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68502 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Bryan LGH Home Health Care Services 501002 NURSING SERVICES OCCUPATIONAL THERAPY 2300 SOUTH 16TH TOWER A, SUITE 400 **JCAHO** PHYSICAL THERAPY (402) 481-9999 FAX: (402) 481-9990 RESPIRATORY THERAPY

c/o: BRYANLGH HOME HEALTH CARE 2300 SOUTH 16TH TOWER A, SUITE 400, LINCOLN NE 68502

BRYANLGH MEDICAL CENTER

MARILYN VIEHL

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 HHA LIC **INDIVIDUAL** Comfort Keepers HHA1038 145 S 56TH ST SUITE A (402) 484-5177 FAX: STORM 100 LLC DBA COMFORT KEEPERS DAVID STORM c/o: COMFORT KEEPERS 145 S 56TH ST SUITE A, LINCOLN NE 68510 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68505 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY ELITE PROFESSIONALS HOME CARE COMPANY HHA1033 NURSING SERVICES OCCUPATIONAL THERAPY 630 N COTNER BLVD SUITE 103 PHYSICAL THERAPY (402) 464-2422 FAX: (402) 464-2922 SPEECH THERAPY ELITE PROFESSIONALS HOME CARE COMPANY JENNIFER GIBBONS c/o: ELITE PROFESSIONALS HOME CARE, INC 630 N COTNER BLVD SUITE 103, LINCOLN NF 68505 DIALYSIS LINCOLN (LANCASTER) - 68506 HHA8/9 **CORPORATION** HOME HEALTH AIDE 501003 Firstcare Home Health of Eastern Nebraska, Inc. INTRAVENOUS THERAPY NURSING SERVICES 3901 NORMAL BLVD, SUITE 204 OCCUPATIONAL THERAPY (402) 435-1122 FAX: (402) 435-4854 PHYSICAL THERAPY SPEECH THERAPY FIRSTCARE HOME HEALTH OF EASTERN NEBR. INC. CINDY BRENNFOERDER c/o: FIRSTCARE HOME HEALTH OF EASTE 3901 NORMAL BLVD, SUITE 204, LINCOLN NE 68506 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 HHA LIC CORPORATION INTRAVENOUS THERAPY Gentiva Health Services 501015 NURSING SERVICES OCCUPATIONAL THERAPY 8055 O STREET, SUITE 111 PHYSICAL THERAPY (402) 434-8081 FAX: (402) 489-8570 SOCIAL WORK PRACTICE SPEECH THERAPY GENTIVA HEALTH SERVICES(USA), INC. MELISSA BORMAN c/o: GENTIVA HEALTH SERVICES 8055 O STREET, SUITE 111, LINCOLN NE 68510 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Gentiva Health Services 501014 NURSING SERVICES OCCUPATIONAL THERAPY 8055 O STREET, SUITE 111 PHYSICAL THERAPY (402) 434-8081 FAX: (402) 489-8570 SOCIAL WORK PRACTICE SPEECH THERAPY

NE 68510

c/o: GENTIVA HEALTH SERVICES 8055 O STREET, SUITE 111, LINCOLN

GENTIVA CERTIFIED HEALTHCARE CORP.

MELISSA BORMAN

PHYLLIS RIZZO

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 **HHA LIC CORPORATION** NURSING SERVICES Home Care Specialties of Tabitha, Inc. 501006 4720 RANDOLPH STREET (402) 486-8525 FAX: (402) 486-8578 TABITHA INC. **GAYLE GENGENBACH** c/o: HOME CARE SPECIALTIES OF TABIT 4720 RANDOLPH STREET, LINCOLN NE 68510 BRANCH/SATELLITE: Home Care Specialities of Tabitha - 819 Central, NEBRASKA CITY BRANCH/SATELLITE: Home Care Specialties of Tabitha - 2842 OLD FAIR ROAD, GRAND ISLAND BRANCH/SATELLITE: Home Care Specialties of Tabitha - 139 North 3rd, Suite 5, SEWARD BRANCH/SATELLITE: Home Care Specialties of Tabitha - 522 Grant Ave., YORK BRANCH/SATELLITE: Home Care Specialties of Tabitha - 1423 N. 7th Street, AURORA HOME HEALTH AIDE LINCOLN (LANCASTER) - 68516 HHA8/9 LIMITED LIABIL INTRAVENOUS THERAPY Interim Health Care of Lincoln, LLC 501010 NURSING SERVICES OCCUPATIONAL THERAPY 6040 SOUTH 58TH STREET, SUITE A PHYSICAL THERAPY (402) 421-7920 FAX: (402) 421-7921 SOCIAL WORK PRACTICE SPEECH THERAPY INTERIM HEALTHCARE OF LINCOLN, LLC LYNETTE HELLING c/o: INTERIM HEALTH CARE 6040 SOUTH 58TH STREET, SUITE A, LINCOLN NE 68516 INTRAVENOUS THERAPY LINCOLN (LANCASTER) - 68516 HHA LIC CORPORATION NURSING SERVICES Option Care Enterprises Inc 501016 4401 SOUTH 70TH STREET, SUITE 2 (402) 423-1333 FAX: (402) 423-7910 OPTION CARE ENTERPRISES, INC. PAULA HANSEN c/o: OPTION CARE ENTERPRISES INC 4401 SOUTH 70TH STREET, SUITE 2, LINCOLN NE 68516 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 **HHA8/9 CORPORATION** INTRAVENOUS THERAPY St ELIZABETH HOME CARE SERVICES 501005 NURSING SERVICES OCCUPATIONAL THERAPY 245 SOUTH 84TH STREET, SUITE 111 **JCAHO** PHYSICAL THERAPY (402) 219-7043 FAX: (402) 219-2043 SOCIAL WORK PRACTICE SPEECH THERAPY ST. ELIZABETH REGIONAL MEDICAL CENTER PHYLLIS RIZZO c/o: ST. ELIZABETH REGIONAL MEDICAL CENTER ATT: ADMINISTRATOR, 555 SOUTH 70TH STREET, LINCOLN NE 68510 HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 **CORPORATION HHA LIC** NURSING SERVICES 501022 St Elizabeth Private Duty Home Care PHYSICAL THERAPY 245 SOUTH 84TH STREET, SUITE 111 **JCAHO** (402) 219-7043 FAX: (402) 219-2043 ST. ELIZABETH REGIONAL MEDICAL CENTER

c/o: ST. ELIZABETH REGIONAL MEDICAL CENTER ATT: ADMINISTRATOR, 555 SOUTH 70TH STREET, LINCOLN NE 68510

SPEECH THERAPY

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Accreditation Administration **Services** HOME HEALTH AIDE LINCOLN (LANCASTER) - 68510 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Tabitha Home Health Care 501017 NURSING SERVICES OCCUPATIONAL THERAPY 4720 RANDOLPH STREET PHYSICAL THERAPY (402) 486-8560 FAX: (402) 484-9695 SOCIAL WORK PRACTICE SPEECH THERAPY TABITHA INC. PATRICIA MEHMKEN c/o: TABITHA HOME HEALTH CARE 4720 RANDOLPH STREET, LINCOLN NE 68510 BRANCH/SATELLITE: Tabitha Home Health Care - 854 G STREET, GENEVA BRANCH/SATELLITE: Tabitha Home Health Care - 204 NORTH RANDOLPH, WEEPING WATER BRANCH/SATELLITE: Tabitha Home Health Care - 522 GRANT AVE. / P.O. BOX 488, YORK BRANCH/SATELLITE: Tabitha Home Health Care - 819 CENTRAL AVENUE, NEBRASKA CITY BRANCH/SATELLITE: Tabitha Home Health Care - 2842 OLD FAIR ROAD, GRAND ISLAND BRANCH/SATELLITE: Tabitha Home Health Care - 316 NORTH 5TH STREET, SEWARD BRANCH/SATELLITE: Tabitha Home Health Care / Warren Memorial Hosp - 905 2ND STREET, FRIEND BRANCH/SATELLITE: Tabitha Home Health Care / Memorial Hospital - 1423 7TH STREET, AURORA BRANCH/SATELLITE: TABITHA HOME HEALTH CARE - 527 E STREET, DAVID CITY HOME HEALTH AIDE MCCOOK (RED WILLOW) - 69001 NON PROFIT - C HHA8/9 INTRAVENOUS THERAPY Community Healthcare 651001 NURSING SERVICES OCCUPATIONAL THERAPY 407 WEST FIFTH STREET **JCAHO** PHYSICAL THERAPY SPEECH THERAPY (308) 345-8356 FAX: (308) 345-1515 COMMUNITY HOSPITAL ASSOCIATION JAMES ULRICH c/o: COMMUNITY HEALTHCARE PO BOX 1328, 407 WEST FIFTH STREET, MCCOOK NE 69001 NELIGH (ANTELOPE) - 68756 **CORPORATION** HOME HEALTH AIDE **HHA8/9** INTRAVENOUS THERAPY Antelope Memorial Hospital Home Health Care 021001 NURSING SERVICES P O BOX 229, 102 WEST 9TH STREET PHYSICAL THERAPY SPEECH THERAPY (402) 887-4151 FAX: (402) 887-4092 ANTELOPE MEMORIAL HOSPITAL JACK GREEN c/o: ANTELOPE MEMORIAL HOSP. HOME H P O BOX 229, 102 WEST 9TH STREET, NELIGH NF 68756 HOME HEALTH AIDE NEWCASTLE (DIXON) - 68757 **HHA LIC** CORPORATION INTRAVENOUS THERAPY 241001 St. Luke's Home Health Agency NURSING SERVICES OCCUPATIONAL THERAPY 58694 882ND ROAD PHYSICAL THERAPY (712) 279-3984 FAX: (712) 279-4975 SOCIAL WORK PRACTICE

PRISCILLA STOKES

INTRUST

c/o: ST. LUKES HOME HEALTH AGENCY ATT: PRISCILLA STOKES, EXECUTIVE DIRECTOR, 2720 STONE PARK BLVD, SUITE 433, SIOUX CITY IA 51104

LUCINDA BRADLEY

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE NORFOLK (MADISON) - 68701 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Faith Regional Home Health Service 521001 NURSING SERVICES OCCUPATIONAL THERAPY 1500 KOENIGSTEIN **JCAHO** PHYSICAL THERAPY (402) 644-7453 FAX: (402) 644-7464 SOCIAL WORK PRACTICE SPEECH THERAPY FAITH REGIONAL HEALTH SERVICES JEAN SUEHL c/o: FAITH REGIONAL HOME HEALTH SER 1500 KOENIGSTEIN, NORFOLK NE 68701 HOME HEALTH AIDE NORFOLK (MADISON) - 68701 **HHA LIC CORPORATION** NURSING SERVICES Nebcare Health Services HHA1030 904 RIVERSIDE BLVD SUITE A (402) 371-5400 FAX: (402) 379-5593 NEBCARE HEALTH SERVICES INC. HELEN BERNBECK c/o: NEBCARE HEALTH SERVICES 904 RIVERSIDE BLVD SUITE A, NORFOLK NF 68701 HOME HEALTH AIDE NORFOLK (MADISON) - 68701 HHA LIC **CORPORATION** NURSING SERVICES Personal Touch Home Care/Faith Regional Health Serv. 521002 1500 KOENIGSTEIN (402) 371-4880 FAX: (402) 644-7464 FAITH REGIONAL HEALTH SERVICES JEAN SUEHL c/o: PERSONAL TOUCH HOME CARE/FAITH 1500 KOENIGSTEIN. NORFOLK NE 68701 DIALYSIS NORTH PLATTE (LINCOLN) - 69101 HHA-19 CORPORATION HOME HEALTH AIDE All About Caring In-Home Services HHA1018 INTRAVENOUS THERAPY NURSING SERVICES 802 SOUTH JEFFERS (308) 696-1042 FAX: (308) 696-1065 ALL ABOUT CARING IN-HOME SERV. INC. CHRISTINE SOMMER c/o: ALL ABOUT CARING IN-HOME SERVI 802 SOUTH JEFFERS, NORTH PLATTE NE 69101 HOME HEALTH AIDE NORTH PLATTE (LINCOLN) - 69103 **CORPORATION** HHA8/9 INTRAVENOUS THERAPY Great Plains Home Health & Hospice 511001 NURSING SERVICES OCCUPATIONAL THERAPY 1021 SOUTH COTTONWOOD STREET **JCAHO** PHYSICAL THERAPY (308) 696-7434 FAX: (308) 535-7407 SOCIAL WORK PRACTICE SPEECH THERAPY NORTH PLATTE NE HOSPITAL CORPORATION

c/o: GREAT PLAINS HOME HEALTH & HOSPICE ATT: LUCINDA BRADLEY, ADMINISTRATOR, P.O. BOX 1167, NORTH PLATTE NE 69103

c/o: ALL ANGELS INCORPORATED 10805 ELM STREET, OMAHA

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE O' NEILL (HOLT) - 68763 HHA8/9 NON PROFIT - C INTRAVENOUS THERAPY Avera St Anthonys Home Health Agency 411001 NURSING SERVICES OCCUPATIONAL THERAPY 300 N 2ND STREET PHYSICAL THERAPY (402) 336-5126 FAX: (402) 336-5262 SPEECH THERAPY AVERA ST. ANTHONY'S HOSPITAL RONALD CORK c/o: ST. ANTHONY'S HOSPITAL HOME HEALTH AGENCY PO BOX 270, 300 N 2ND STREET, O'NEILL NE 68763 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68154 HHA LIC **CORPORATION** INTRAVENOUS THERAPY Accessible Home Health Care Of Omaha HHA200605 NURSING SERVICES OCCUPATIONAL THERAPY 12020 SHAMROCK PLAZA #200 PHYSICAL THERAPY (402) 778-4816 FAX: RESPIRATORY THERAPY SOCIAL WORK PRACTICE ACCESSIBLE HEALTHCARE SERVICES SPEECH THERAPY CHERYLE SEXTON c/o: ACCESSIBLE HOME HEALTH CARE OF OMAHA 12020 SHAMROCK PLAZA #200, OMAHA NE 68154 NURSING SERVICES OMAHA (DOUGLAS) - 68137 HHA LIC **CORPORATION** HHA1051 Accredo Health Group Inc 11329 P STREET SUITE 118 & 119 (402) 597-2330 FAX: (402) 597-2333 LINDA ORTMAN c/o: LICENSING & REGULATORY DEPAT 1640 CENTURY CENTER PKWY SUITE 101, ATTN: AMANDA HERRING, MEMPHIS TN 38134 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68106 **CORPORATION HHA8/9** INTRAVENOUS THERAPY Alegent Health Home Care & Hospice 261002 NURSING SERVICES OCCUPATIONAL THERAPY 7070 SPRING STREET **JCAHO** PHYSICAL THERAPY (402) 898-8000 FAX: (402) 898-8080 RESPIRATORY THERAPY SOCIAL WORK PRACTICE ALEGENT HEALTH SPEECH THERAPY DENISE MCNITT c/o: ALEGENT HEALTH HOME CARE & HOS 7070 SPRING STREET, OMAHA NE 68106 BRANCH/SATELLITE: Iowa Branch, Southwest Iowa Medical Center - 701 HARMONY, SUITE 101, COUNCIL BLUFFS HOME HEALTH AIDE OMAHA (DOUGLAS) - 68144 HHA LIC NURSING SERVICES All Angels Incorporated HHA1053 10805 ELM STREET (402) 397-1601 FAX: ALL ANGEL INCORPORATED ANGELA GILFILLAN, RN, RN/LPN

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA LIC **CORPORATION** INTRAVENOUS THERAPY All Midlands Health Services, Inc. HHA1023 NURSING SERVICES 8534 CASS STREET (402) 391-5554 FAX: (402) 391-8211 ALL MIDLANDS HEALTH SERVICES, INC. JAMES RAGO c/o: ALL MIDLANDS HEALTH SERVICES, 8534 CASS STREET, OMAHA NE 68114 NURSING SERVICES OMAHA (DOUGLAS) - 68124 **HHA LIC** ARJ Infusion Services, Inc HHA1054 8031 W CENTER RD SUITE 304 (402) 991-8037 FAX: (402) 991-3199 ARJ INFUSION SERVICES MICHELLE LOGSDON c/o: ARJ INFUSION SERVICES, INC 8031 W CENTER RD SUITE 304, OMAHA NF 68124 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68124 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Asera Care Home Health - Omaha, LLC HHA1044 NURSING SERVICES OCCUPATIONAL THERAPY 1104 S 76TH AVENUE PHYSICAL THERAPY (402) 397-0211 FAX: SOCIAL WORK PRACTICE SPEECH THERAPY ANDREA MCVEIGH c/o: ASERA CARE HOME HEALTH 1104 S 76TH AVENUE, OMAHA NF 68124 INTRAVENOUS THERAPY OMAHA (DOUGLAS) - 68117 HHA8/9 CORPORATION NURSING SERVICES Children's Home Healthcare 261006 OCCUPATIONAL THERAPY PHYSICAL THERAPY 4156 SOUTH 52ND STREET **JCAHO** RESPIRATORY THERAPY (402) 734-6741 FAX: (402) 734-7653 CHILDRENS HOME HEALTHCARE KELLY MUTCHIE c/o: CHILDREN'S HOME HEALTHCARE 4156 SOUTH 52ND STREET, OMAHA NE 68117 INTRAVENOUS THERAPY OMAHA (DOUGLAS) - 68130 HHA LIC **CORPORATION** NURSING SERVICES Coram Alternate Site Services, Inc. 261008 2324-36 SOUTH 156TH CIRCLE (402) 330-5482 FAX: (402) 330-2697

c/o: CORAM ALTERNATE SITE SERVICES 2324-36 SOUTH 156TH CIRCLE, OMAHA NE 68130

CORAM ALTERNATE SITE SERVICES, INC.

MARILYN ROARTY

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68127 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY First Choice Healthcare 261011 NURSING SERVICES OCCUPATIONAL THERAPY 8710 F STREET, SUITE 118 PHYSICAL THERAPY (402) 397-8330 FAX: (402) 597-2679 RESPIRATORY THERAPY SOCIAL WORK PRACTICE INFUSION THERAPY SPECIALISTS, INC. SPEECH THERAPY PAUL WETTENGEL c/o: FIRSTCHOICE HEALTHCARE 8710 F STREET, SUITE 118, OMAHA NE 68127 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68137 **HHA LIC CORPORATION** INTRAVENOUS THERAPY Gentiva Health Services 261023 NURSING SERVICES OCCUPATIONAL THERAPY 11211 JOHN GALT BLVD **JCAHO** PHYSICAL THERAPY (402) 593-1300 FAX: (402) 593-1876 SOCIAL WORK PRACTICE SPEECH THERAPY GENTIVA HEALTH SERVICES(USA), INC. JODY EKSTROM c/o: GENTIVA HEALTH SERVICES 11213 JOHN GALT BLVD, OMAHA NF 68137 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68137 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY 261022 Gentiva Health Services NURSING SERVICES OCCUPATIONAL THERAPY 11211 JOHN GALT BLVD **JCAHO** PHYSICAL THERAPY (402) 593-1300 FAX: (402) 593-1876 SOCIAL WORK PRACTICE SPEECH THERAPY GENTIVA CERTIFIED HEALTHCARE CORP. JODY EKSTROM c/o: GENTIVA HEALTH SERVICES 11211 JOHN GALT BLVD, OMAHA NF 68137 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68116 HHA LIC CORPORATION NURSING SERVICES Gerhard Enterprises Inc., dba Custom Care HHA1028 15683 SPAULDING STREET SUITE 10 (402) 320-3700 FAX: (402) 932-4970 ANGELA GERHARD, RN/LPN c/o: CUSTOM CARE 15683 SPAULDING STREET SUITE 10, OMAHA NE 68116 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68144 HHA8/9 **CORPORATION** NURSING SERVICES Home Nursing With Heart HHA1046 14441 DUPONT CT, SUITE 103 A (402) 614-4622 FAX: HOME NURSING WITH HEART

c/o: HOME NURSING WITH HEART 14441 DUPONT CT, SUITE 103 A, OMAHA NE 68144

JULIE HARDING

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Accreditation Administration **Services** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68134 HHA LIC **CORPORATION** Hunting Isle dba Comfort Keepers HHA1036 **5437 N 103RD STREET** (402) 991-9880 FAX: (402) 991-9889 HUNTING ISLE DBA COMFORT KEEPRS **RICK MAGILL** c/o: COMFORT KEEPERS 5437 N 103RD STREET, OMAHA NE 68134 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68130 HHA LIC **CORPORATION** NURSING SERVICES IFY's Home Health Care HHA200604 OCCUPATIONAL THERAPY PHYSICAL THERAPY 2505 SOUTH 186TH CIR SOCIAL WORK PRACTICE (402) 201-3733 FAX: (402) 697-7123 SPEECH THERAPY IFY'S HOME HEALTH CARE INC FRED EDEGBELE c/o: IFY'S HOME HEALTH CARE 2505 SOUTH 186TH CIR, OMAHA NE 68130 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA8/9 **CORPORATION** NURSING SERVICES Interim Health Care of Omaha 261012 OCCUPATIONAL THERAPY PHYSICAL THERAPY 7602 PACIFIC STREET, SUITE 102 SPEECH THERAPY (402) 392-1818 FAX: (402) 392-0167 INTERIM HEALTHCARE OF OMAHA PAUL MILLMAN c/o: INTERIM HEALTH CARE 7602 PACIFIC STREET, SUITE 102, OMAHA NF 68114 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA8/9 CORPORATION INTRAVENOUS THERAPY INTREPID OF NEBRASKA, INC dba Intrepid USA Healthcare Servi 261030 NURSING SERVICES OCCUPATIONAL THERAPY 909 NORTH 96TH STREET, SUITE 102 PHYSICAL THERAPY (402) 393-8064 FAX: (402) 397-5464 SOCIAL WORK PRACTICE SPEECH THERAPY INTREPID OF NEBRASKA INC MARGARET RUSSELL c/o: INTREPID U.S.A., INC. ATT: LEGAL DEPARTMENT, 6600 FRANCE AVENUE SOUTH, SUITE 510, EDINA MN 55435 INTRAVENOUS THERAPY OMAHA (DOUGLAS) - 68144 HHA LIC **CORPORATION** NURSING SERVICES MATRIA WOMEN'S AND CHILDREN'S HEALTH LLC 261016

(800) 999-9428 FAX: (402) 334-2958

MATRIA HEALTHCARE, INC.

11902 ELM STREET, SUITE 3B

KAREN PINNEY

c/o: MATRIA HEALTHCARE, INC. ATT: FERN MATHEWS, REGULATORY AFFAIRS, 1850 PARKWAY PLACE, 6TH FLOOR, MARIETTA GA 30067

JCAHO

SOCIAL WORK PRACTICE

SPEECH THERAPY

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** DIALYSIS OMAHA (DOUGLAS) - 68124 HHA-19 **CORPORATION** HOME HEALTH AIDE Maxim Healthcare Services Inc HHA1022 INTRAVENOUS THERAPY NURSING SERVICES 9239 WEST CENTER ROAD, SUITE 223 (402) 399-8888 FAX: (402) 399-0200 MAXIM HEALTHCARE SERVICES INC. SHELI RIEDEL c/o: MAXIM HEALTHCARE SERVICES INC 9239 WEST CENTER ROAD, SUITE 223, OMAHA NE 68124 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 **HHA LIC CORPORATION** INTRAVENOUS THERAPY NE Methodist Hosp Home Health 261018 NURSING SERVICES OCCUPATIONAL THERAPY 8601 WEST DODGE ROAD SUITE 138 PHYSICAL THERAPY SOCIAL WORK PRACTICE (402) 354-3200 FAX: (402) 354-3320 SPEECH THERAPY NEBRASKA METHODIST HOSPITAL JOHN FRASER c/o: NE METHODIST HOSPITAL HOME HEALTH 8601 WEST DODGE ROAD SUITE 138, OMAHA NE 68114 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA8/9 **CORPORATION** NURSING SERVICES 261020 Nurse Providers, Inc. 344 NORTH 76TH STREET (402) 399-1700 FAX: (402) 393-0883 NURSE PROVIDERS, INC. SALLY VILMONT c/o: NURSE PROVIDERS, INC. 344 NORTH 76TH STREET, OMAHA NF 68114 INTRAVENOUS THERAPY OMAHA (DOUGLAS) - 68137 HHA LIC CORPORATION NURSING SERVICES Option Care Enterpises, Inc. 261025 10924 JOHN GALT BLVD. (402) 331-0980 FAX: (402) 331-3534 OPTION CARE ENTERPRISES, INC. PAULA HANSEN c/o: OPTION CARE ENTERPRISES, INC. 10918 JOHN GALT BLVD., OMAHA NE 68137 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68127 HHA8/9 LIMITED LIABIL NURSING SERVICES Physicians Choice Nebraska, LLC HHA1047 OCCUPATIONAL THERAPY PHYSICAL THERAPY 8212 F STREET

ANNMARIE MARSH

(402) 331-2273 FAX:

c/o: PHYSICIANS CHOICE HOME HEALTH CARE 8212 F STREET, OMAHA NE 68127

QUALITY LIVING, INC. BARBARA PILLE

c/o: QUALITY LIVING INC HOME HEALTH 6404 N 70TH PLAZA, OMAHA

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA8/9 INTRAVENOUS THERAPY PHYSMED Inc HHA1043 NURSING SERVICES OCCUPATIONAL THERAPY 10020 NICHOLAS STREET, SUITE 105 PHYSICAL THERAPY (402) 926-4088 FAX: (402) 926-4197 SPEECH THERAPY DOMERLIN SODUSTA c/o: PHYSMED INC 10020 NICHOLAS STREET, SUITE 105, OMAHA NE 68114 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68102 **HHA8/9 SOLE PROPRIETO** NURSING SERVICES Primary Home Care 261560 OCCUPATIONAL THERAPY PHYSICAL THERAPY 206 SOUTH 19TH STREET SPEECH THERAPY (402) 345-1350 FAX: (402) 345-1374 PRIMARY HOME CARE JEANNINE BLAN c/o: PRIMARY HOME CARE 206 SOUTH 19TH STREET, OMAHA NE 68102 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68106 HHA8/9 INTRAVENOUS THERAPY HHA1042 Prime Home Care NURSING SERVICES OCCUPATIONAL THERAPY 6818 GROVER STREET SUITE 304 PHYSICAL THERAPY (402) 390-2492 FAX: (402) 390-9070 RESPIRATORY THERAPY SOCIAL WORK PRACTICE JACKIE ROSS SPEECH THERAPY TAMMY KIRSCH c/o: PRIME HOME CARE 6818 GROVER STREET SUITE 304, OMAHA NE 68106 BRANCH/EXTENSION/OFFSITE: PRIME HOME CARE - 123 NORTH 15TH STREET, CLARINDA HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA8/9 **SOLE PROPRIETO** INTRAVENOUS THERAPY Quality Care Medical Staffing HHA1024 NURSING SERVICES 7827 WAKELEY PLAZA (402) 884-1645 FAX: (403) 884-1647 QUALITY CARE MEDCAL STAFFING PATIENCE OKONJI-GRIFFIN, RN/LPN c/o: QUALITY CARE MEDICAL STAFFING 7827 WAKELEY PLAZA, OMAHA NE 68114 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68104 HHA-19 **CORPORATION** NURSING SERVICES Quality Living Inc Home Health HHA1002 OCCUPATIONAL THERAPY PHYSICAL THERAPY 6404 N 70TH PLAZA SPEECH THERAPY (402) 573-3700 FAX: (402) 573-3790

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Accreditation Administration **Services** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68137 HHA LIC **CORPORATION** NURSING SERVICES Right at Home HHA1007 11949 Q STREET SUITE 100 (402) 697-7537 FAX: (402) 697-7536 TERYL CORPORATION MARY DYSON c/o: RIGHT AT HOME 11949 Q STREET SUITE 100, OMAHA NE 68137 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA8/9 **CORPORATION** NURSING SERVICES St Joseph Villa Homecare & Hospice 261027 OCCUPATIONAL THERAPY PHYSICAL THERAPY 1000 NORTH 90TH STREET SUITE 203 SOCIAL WORK PRACTICE (402) 926-4444 FAX: (402) 393-8230 SPEECH THERAPY DELMAR GARDENS OF OMAHA, L.L.C MARY OLIVER c/o: ST. JOSEPH VILLA HOMECARE & HO 1000 NORTH 90TH STREET SUITE 203, OMAHA NE 68114 NURSING SERVICES OMAHA (DOUGLAS) - 68198 HHA LIC **CORPORATION** The Nebraska Medical Center Senior Assist Community Case Man 261574 981250 NEBRASKA MEDICAL CENTER **JCAHO** (402) 559-5047 FAX: (402) 559-9384 THE NEBRASKA MEDICAL CENTER **CAROL SMITH** THE NEBRASKA MEDICAL CENTER, 987400 NEBRASKA MEDICAL CENTER, OMAHA NE 68198 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68114 HHA LIC CORPORATION INTRAVENOUS THERAPY Tri-State Nursing Enterprises Inc HHA1029 NURSING SERVICES OCCUPATIONAL THERAPY 7701 PACIFIC STREET SUITE 104 PHYSICAL THERAPY (402) 502-1610 FAX: (402) 502-1620 SPEECH THERAPY TRI-STATE NURSING ENTERPRISES INC BRIDGET HOEFLING, RN/LPN c/o: TRI STATE NURSING ENTERPRISES, INC 621 16TH STREET, SIOUX CITY IA 51105 HOME HEALTH AIDE OMAHA (DOUGLAS) - 68105 HHA8/9 NON PROFIT - C INTRAVENOUS THERAPY Visiting Nurse Assn. of The Midlands 261029 NURSING SERVICES OCCUPATIONAL THERAPY 1941 SOUTH 42ND, SUITE 225 PHYSICAL THERAPY (402) 342-5566 FAX: (402) 342-0034 SOCIAL WORK PRACTICE SPEECH THERAPY VISITING NURSE ASSOCIATION OF THE MIDLANDS

NE 68105

c/o: VISITING NURSE ASSN. OF THE MI 1941 SOUTH 42ND, SUITE 225, OMAHA

JAMES SUMMERFELT

BURCHARD MARTHA

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Licensee License # Ownership/ Type Administration Accreditation **Services** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68105 HHA LIC NON PROFIT - C NURSING SERVICES Visiting Nurse Health Services 261572 1941 S. 42 STREET, SUITE 225 (402) 342-5566 FAX: (402) 342-0034 VISITING NURSE HEALTH SERVICES **ELIZABETH CERNECH** HOME HEALTH AIDE OMAHA (DOUGLAS) - 68154 **HHA8/9 CORPORATION** NURSING SERVICES Vitalcare Home Health 261559 OCCUPATIONAL THERAPY PHYSICAL THERAPY 13042 WEST DODGE ROAD SPEECH THERAPY (402) 502-3665 FAX: (402) 502-3666 APPLEGATE TECHNICAL SERVICES, INC. MARY APPELGATE c/o: VITALCARE HOME HEALTH 13042 WEST DODGE ROAD, OMAHA NF 68154 HOME HEALTH AIDE ORD (VALLEY) - 68862 **HHA LIC GOVERNMENT-COU** NURSING SERVICES 781002 Valley County Hospital At Home Professional Care OCCUPATIONAL THERAPY 400 SOUTH 23RD PHYSICAL THERAPY SOCIAL WORK PRACTICE (308) 728-3114 FAX: (308) 728-3137 VALLEY COUNTY HEALTH SYSTEM LARRY SCHRAGE c/o: VALLEY COUNTY HOSPITAL AT HOME PROFESSIONAL CARE ATT: PHILLIP LOWE, ADMINISTRATOR, 217 WESTRIDGE DRIVE, ORD NE 68862 HOME HEALTH AIDE ORD (VALLEY) - 68862 **GOVERNMENT-COU HHA8/9** NURSING SERVICES 781001 Valley County Hospital Home Health OCCUPATIONAL THERAPY PHYSICAL THERAPY 400 SOUTH 23RD STREET SOCIAL WORK PRACTICE (308) 728-3114 FAX: (308) 728-3137 VALLEY COUNTY HEALTH SYSTEM LARRY SCHRAGE c/o: VALLEY COUNTY HOSPITAL HOME HEALTH ATT: NEELAM BHARDWAJ, ADMINISTRATOR, 217 WESTRIDGE DRIVE, ORD NE 68862 HOME HEALTH AIDE PENDER (THURSTON) - 68047 **HHA LIC** CORPORATION INTRAVENOUS THERAPY Mercy Home Care 771001 NURSING SERVICES OCCUPATIONAL THERAPY 200 VALLEY VIEW DRIVE, ROOM 305 PHYSICAL THERAPY (402) 385-0199 FAX: (712) 233-5102 RESPIRATORY THERAPY SOCIAL WORK PRACTICE MERCY MEDICAL CENTER SPEECH THERAPY

c/o: MERCY HOME CARE ATT: MARTH BURCHARD, RN INTERIM DIRECTOR, 801 5TH STREET SUITE 320, SIOUX CITY IA 51101

c/o: CARING COMPANIONS 645 OSAGE, SIDNEY

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE PLAINVIEW (PIERCE) - 68769 HHA8/9 **GOVERNMENT-CIT** INTRAVENOUS THERAPY Plainview Home Care 621001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 489, 704 NORTH 3RD PHYSICAL THERAPY (402) 582-4245 FAX: (402) 582-3940 SPEECH THERAPY PLAINVIEW AREA HEALTH SYSTEM REBECCA LAMBRECHT c/o: PLAINVIEW HOME CARE PO BOX 489, 704 NORTH 3RD, PLAINVIEW NE 68769 HOME HEALTH AIDE SCHUYLER (COLFAX) - 68661 **HHA8/9 CORPORATION** INTRAVENOUS THERAPY Alegent Health Memorial Hospital Home Health Agency 171001 NURSING SERVICES OCCUPATIONAL THERAPY 104 WEST 17TH STREET PHYSICAL THERAPY SOCIAL WORK PRACTICE (402) 352-2441 FAX: (402) 352-2643 SPEECH THERAPY ALEGENT HEALTH CONNIE PETERS c/o: ALEGENT HEALTH MEMORIAL HOSP. 104 WEST 17TH STREET, SCHUYLER NF 68661 NURSING SERVICES SCOTTSBLUFF (SCOTTS BLUFF) - 69361 HHA LIC **GOVERNMENT-COU** PMHC Home Health Care HHA1003 4110 AVENUE D (308) 635-3171 FAX: (308) 635-7026 PANHANDLE MENTAL HEALTH CENTER **BRASUELL GINGER** c/o: PMHC PSYCHIATRIC HOME HEALTH CARE 4110 AVENUE D, SCOTTSBLUFF NF 69361 HOME HEALTH AIDE SCOTTSBLUFF (SCOTTS BLUFF) - 69361 HHA8/9 CORPORATION INTRAVENOUS THERAPY Regional West Home Care 701002 NURSING SERVICES OCCUPATIONAL THERAPY 4021 AVENUE B **JCAHO** PHYSICAL THERAPY (308) 630-1430 FAX: (308) 630-1823 SOCIAL WORK PRACTICE SPEECH THERAPY REGIONAL WEST MEDICAL CENTER **TODD SORENSEN** c/o: REGIONAL WEST HOME CARE 4021 AVENUE B, SCOTTSBLUFF NE 69361 HOME HEALTH AIDE SIDNEY (CHEYENNE) - 69162 HHA LIC **CORPORATION** INTRAVENOUS THERAPY Memorial Health Center Caring Companions HHA1010 NURSING SERVICES OCCUPATIONAL THERAPY 645 OSAGE PHYSICAL THERAPY (308) 254-3273 FAX: (308) 254-4225 SOCIAL WORK PRACTICE SPEECH THERAPY CHEYENNE CO. HOSPITAL ASSOCIATION, INC. TYLER ERICKSON

BRENT PETERSON

TOWN (County) Zip Code Name of Facility Address **Phone Number** Fac Type Ownership/ Type Licensee License # Accreditation Administration **Services** HOME HEALTH AIDE SIDNEY (CHEYENNE) - 69162 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Memorial Health Center Home Health 151001 NURSING SERVICES OCCUPATIONAL THERAPY 645 OSAGE STREET PHYSICAL THERAPY (308) 254-3273 FAX: (308) 254-4225 SOCIAL WORK PRACTICE SPEECH THERAPY CHEYENNE CO. HOSPITAL ASSOCIATION, INC. TYLER ERICKSON c/o: MEMORIAL HEALTH CENTER HOME HE 645 OSAGE STREET, SIDNEY NE 69162 BRANCH/EXTENSION/OFFSITE: MEMORIAL HEALTH CENTER HOME HE - 2ND SPRUCE STREET, OGALLALA HOME HEALTH AIDE SUPERIOR (NUCKOLLS) - 68978 **HHA8/9 CORPORATION** NURSING SERVICES Brodstone Memorial Home Health Care 571001 OCCUPATIONAL THERAPY PHYSICAL THERAPY 530 EAST 11TH STREET SPEECH THERAPY (402) 879-3910 FAX: (402) 879-3401 **BRODSTONE MEMORIAL HOSPITAL** CAROLYN BRZON c/o: BRODSTONE MEMORIAL HOME HEALTH CARE CAROLYN BRZON, ADMINISTRATOR, PO BOX 187, SUPERIOR NE 68978 BRANCH/SATELLITE: Kansas Branch / BRODSTONE MEM HOME HLTH CR - 2051 40 ROAD, REPUBLIC HOME HEALTH AIDE SYRACUSE (OTOE) - 68446 HHA8/9 **GOVERNMENT-DIS** INTRAVENOUS THERAPY 581003 Community Health Services NURSING SERVICES OCCUPATIONAL THERAPY 1579 MIDLAND STREET, BOX N PHYSICAL THERAPY (402) 269-2011 FAX: (402) 269-2795 SPEECH THERAPY COMMUNITY MEMORIAL HOSPITAL DISTRIC AL KLAASMEYER c/o: COMMUNITY HEALTH SERVICES 1579 MIDLAND STREET, BOX N, SYRACUSE NF 68446 HOME HEALTH AIDE TECUMSEH (JOHNSON) - 68450 HHA8/9 **GOVERNMENT-COU** INTRAVENOUS THERAPY Johnson Co. Hosp. Home Health Services 451001 NURSING SERVICES OCCUPATIONAL THERAPY 202 HIGH STREET, P O BOX 216 PHYSICAL THERAPY (402) 335-3361 FAX: (402) 335-6342 SPEECH THERAPY JOHNSON COUNTY HOSPITAL DIANE NEWMAN c/o: JOHNSON CO HOSP H H 202 HIGH STREET, P O BOX 216, TECUMSEH NE 68450 HOME HEALTH AIDE VALENTINE (CHERRY) - 69201 **HHA8/9 GOVERNMENT-COU** INTRAVENOUS THERAPY Cherry Co Hospital Home Health Services 141001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 410, 510 NORTH GREEN STREET PHYSICAL THERAPY (402) 376-2525 FAX: (402) 376-1627 SPEECH THERAPY CHERRY COUNTY HOSPITAL

c/o: CHERRY CO HOSPITAL HOME HEALTH P O BOX 410, 510 NORTH GREEN STREET, VALENTINE NE 69201

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Ownership/ Type Licensee License # Administration Accreditation **Services** HOME HEALTH AIDE WAHOO (SAUNDERS) - 68066 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY HOSPICE AND HOME HEATHCARE OF SAUNDERS COUNTY 691001 NURSING SERVICES OCCUPATIONAL THERAPY P O BOX 367, 754 WEST 9TH PHYSICAL THERAPY (402) 443-4798 FAX: (402) 443-1586 SPEECH THERAPY CRMT INC. ROBERT PARISH c/o: SAUNDERS COUNTY HEALTH SERVICE P O BOX 367, 754 WEST 9TH, WAHOO NE 68066 HOME HEALTH AIDE WAHOO (SAUNDERS) - 68066 **HHA LIC CORPORATION** NURSING SERVICES THREE RIVERS PUBLIC HEALTH DEPARTMENT 691002 P O BOX 94, 754 WEST 9TH (402) 443-4603 FAX: (402) 443-1412 THREE RIVERS PUBLIC HEALTH DEPARTMENT JEFF KUHR c/o: SAUNDERS COUNTY HEALTH DEPARTM P O BOX 94, 754 WEST 9TH, WAHOO NF 68066 HOME HEALTH AIDE WAYNE (WAYNE) - 68787 HHA8/9 **CORPORATION** INTRAVENOUS THERAPY Providence Medical Center Home Health 801001 NURSING SERVICES OCCUPATIONAL THERAPY 1200 PROVIDENCE ROAD PHYSICAL THERAPY (402) 375-3800 FAX: (402) 375-7626 SOCIAL WORK PRACTICE SPEECH THERAPY PROVIDENCE MEDICAL CENTER, INC. MARCILE THOMAS c/o: PROVIDENCE MEDICAL CENTER HOME 1200 PROVIDENCE ROAD, WAYNE NE 68787 HOME HEALTH AIDE WAYNE (WAYNE) - 68787 HHA LIC CORPORATION NURSING SERVICES Providence Personal Care Services 801002 1200 PROVIDENCE ROAD (402) 375-4288 FAX: (402) 375-7626 PROVIDENCE MEDICAL CENTER, INC. MARCILE THOMAS c/o: PROVIDENCE PERSONAL CARE SERVICE 1200 PROVIDENCE ROAD, WAYNE NE 68787 HOME HEALTH AIDE WAYNE (WAYNE) - 68787 HHA LIC LIMITED LIABIL NURSING SERVICES The Oaks Home Health Care HHA200606 1500 VINTAGE HILL

SUSAN WELLS c/o: THE OAKS HOME HEALTH CARE 1500 VINTAGE HILL, WAYNE

(402) 375-1500 FAX: (402) 375-3379 THE OAKS RETIREMENT COMMUNITY LLC

TOWN (County) Zip Code Name of Facility **Address Phone Number** Fac Type Licensee License # Ownership/ Type Administration Accreditation **Services** HOME HEALTH AIDE WEST POINT (CUMING) - 68788 HHA LIC **CORPORATION** NURSING SERVICES St Francis Personal Care HHA1016 430 N MONITOR ST (402) 372-5929 FAX: (402) 372-6766 FRANCISCAN CARE SERVICES, INC. **RONALD BRIGGS** c/o: ST FRANCIS PERSONAL CARE 430 N MONITOR ST, WEST POINT NE 68788 HOME HEALTH AIDE WEST POINT (CUMING) - 68788 **HHA8/9 CORPORATION** INTRAVENOUS THERAPY St. Francis Home Health Care 181001 NURSING SERVICES OCCUPATIONAL THERAPY 430 NORTH MONITOR STREET PHYSICAL THERAPY (402) 372-5929 FAX: (402) 372-6766 SPEECH THERAPY FRANCISCAN CARE SERVICES, INC. RONALD BRIGGS c/o: ST. FRANCIS HOME HEALTH CARE 430 NORTH MONITOR STREET, WEST POINT NE 68788 HOME HEALTH AIDE YORK (YORK) - 68467 HHA LIC **CORPORATION** NURSING SERVICES 821003 Home Care Plus 2319 N LINCOLN AVENUE (402) 362-2566 FAX: (402) 363-6623 HOME CARE PLUS, INC. CHARLES SCHULZ c/o: HOME CARE PLUS 2319 N LINCOLN AVENUE, YORK NE 68467 HOME HEALTH AIDE YORK (YORK) - 68467 HHA8/9 CORPORATION NURSING SERVICES York General Hospital Home Health Agency 821002 OCCUPATIONAL THERAPY PHYSICAL THERAPY 2319 N LINCOLN AVENUE SPEECH THERAPY (402) 362-1444 FAX:

YORK GENERAL HOSPITAL, INC.

CHARLES SCHULZ

c/o: YORK GENERAL HOSP HOME HEALTH 2319 N LINCOLN AVENUE, YORK

NE 68467

Total Facilities: 128